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APPLICANTS  
 Ling Yuk Cheung, New Territories, HONG KONG;

\*\* CONTINUING DATA \*\*\*\*\* *none*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	STATE OR COUNTRY HONG KONG	SHEETS DRAWING 2	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
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TITLE  
 Methods and compositions for treating epilepsy

FILING FEE  RECEIVED 1244	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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